

FILED

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF INDIANA

MAY -4 PM 3:24  
U.S. DISTRICT COURT  
FOR THE NORTHERN DISTRICT  
OF INDIANA

Tyquan Stewart,  
First Name PLAINTIFF Last Name  
[Type or print your name on the line above]

v.  
State of Indiana  
DEFENDANT  
[Type or print only the name of the first  
person you are suing. List everyone you  
are suing on page 2.]

Cause No. 1:14cv138  
[Leave this blank, the clerk will  
supply the cause number when  
your case is received.]

AMENDED  
COMPLAINT  
42 U.S.C. § 1983

I. PARTIES

A. PLAINTIFF [You are the plaintiff in this lawsuit. Neatly print or type your information below.]

1. Tyquan Tarrell Stewart  
Name: First Middle Last

2. What is your address: 4510 Austin Dr.

Phone number (260) 456-3913

B. DEFENDANT(S) How many defendants are you suing: 5

[The defendants are the people you are suing. Print or type the defendant's name, job title, the state or local government agency the defendant works for, and the address of that government agency. Remember to include the defendant you named in the caption on page one. If you are suing more than one defendant, number them.]

# Amended

#	Defendant's Name	Job Title/Government Agency	Work Address
1.	State of Indiana		State house office office of the State 200 W. Washington St. Room 201
	Westville State prison		5501 S 1100 W, Westville, IN 46391
	Allen County Jail		417 S Calhoun St, Ft, IN 46802
	Parkview behavior hospital		1720 Beacon St, Ft, IN 46805
	Social Security administration		2122 Lincolnway Ct, fort wayne, IN 46819

## II. CAUSE(S) OF ACTION WITH SUPPORTING FACTS

Write why you are suing each defendant. Write who, what, when, where, and how you believe your rights were violated. It is **VERY IMPORTANT** that you use each defendant's name in describing what happened to you. If you do not write what each defendant did, the court will not know why you are suing and that defendant will be dismissed.

Explain what constitutional or federal law right, privilege or immunity each defendant violated. Do not cite or quote cases or statutes. If you want to make legal arguments or citations, you must file a separate memorandum of law. Do not attach it to this complaint.

Write a new paragraph for each violation. Name each defendant involved in that violation.

Number your paragraphs.

1. State of Indiana - Discrimination they went far and beyond to punish me. ~~Someone~~ ~~printed~~ ~~false~~ ~~statements~~ ~~in~~ ~~my~~ ~~motion~~ ~~of~~ ~~discovery~~. ~~They~~ ~~said~~ ~~I~~ ~~was~~ ~~taken~~ ~~to~~ ~~the~~ ~~police~~ ~~station~~ ~~for~~ ~~interview~~, and while there I was screaming I am But it never happened. There is no video or Audio placing me there simply because ~~I~~ never ~~was~~ there. Now this sent me to jail because basically <sup>saying</sup> that they observed me, and they figure I was mentally sane.

Westville State prison - Cruel and unusual punishment I was forced to throw away my food, and I am a diabetic. They used food as a way to punish and that is against the Law and down right Cruel. Inmates are entitled to 3 meals a day. Filed a complaint went un heard.

P.S. The reason why I was unable to speak out about this was because Richard Thorne didn't show me my motion of discovery until I was in court around the time for sentencing and I only had little time to glance at it

Check Kios

## Allen County Jail Cruel and usual

Punishment They placed me in a cell where they was able to lock Restroom door. when pushed buzzed they refused to respond which forced me to relieve myself on the floor. Then They placed me in the hole without Shower for days. I have witnesses some which are Confinement officers and some whom are inmates.

### Parkview

## Parkview behavior hospital Malpractice

← Should be video and audio

I Tried to Check in around Dec. 14 and was refused when was having a psychotic episode. I ran my vehicle into a building trying to kill myself. Someone could of Died including myself which I wanted to do At the time.

### Discrimination

Social Security Administration I filed for Disability in 2009 At that time my kids including myself where eligible for full benefits. I have Schizo effective Disorder, PTSD & Major Depression. I have been in and out of mental hospital. I have 3 professional Doctors including one whom works for the state. Dr. Weiland, Dr. Surakanti, and Dr. Rosemary or Rotman. My kids had to go without because their father ~~is~~ is not able to manage his life which deems me Disable because of mental illness. I've had black outs to which I hurt a guy and Broke his jaw. I've Tried to Commit suicide multiple times and there is a mexican that I know that does not take meds and he receive his Social Security when my illness is much more severe.

# State of Indiana

Cause(s) of Action with Supporting Facts (continued)

Motion of discovery — Check and you will find that I was never taken to police station for questioning no video or audio plus who is the officer who took and who is the officer who interviewed? Check Westville State Prison Kios plus inmates will testify.

Allen County jail check video's plus confinement officer Mrs. Preston / <sup>the little mature white woman</sup> with white hair nurse confinement officer Mr. Hughes Parkview behavior hospital check video & audio and officer working.

## III. PREVIOUS LAWSUITS

Have you ever sued anyone for the same things you wrote about in this complaint?

☒ NO ☐ YES — [Print or type the following information about the case. Attach additional sheets if there is more than one prior case.]

Court: \_\_\_\_\_

Judge: \_\_\_\_\_ Docket Number: \_\_\_\_\_

Date filed: \_\_\_\_\_ Date closed: \_\_\_\_\_

Amended

## IV. RELIEF

Write exactly what you want the court to do for you. This court cannot order that a defendant be fired, investigated, or criminally prosecuted.

I want justice we look for the state for justice now how can we get? this is there breaking the law.

State of Indiana to pay 50,000,000 because for them to do a humane being like this and not have a care in the world why should I.

Allen County jail 1,000,000  
Parkview behavior hospital 1,000,000  
Westville State Prison 1,000,000  
Social Security administration 1,000,000

P.S. judge as you can see this is a pattern

Amended

V. VERIFICATION AND SIGNATURE

**Initial Each Statement and Sign at the Bottom**

T.S I have included two properly completed summons forms (available from the clerk) for each defendant I am suing, including full name, job title and work address.

T.S I have included one properly completed process receipt and return form (USM-285) (available from the U.S. Marshal) for each defendant I am suing.

T.S In addition to this complaint with an original signature, I have included one copy of this complaint for each defendant and one extra for the court.

T.S I have included full payment of the filing fee **OR** attached a properly completed petition to proceed *in forma pauperis* (available from the clerk).

T.S I agree to promptly notify the clerk of any change of address.

T.S I have read all of the statements in this complaint. *[Do not forget to keep a copy for your records.]*

T.S I declare **under penalty of perjury** that the foregoing is true and correct.

Signed this 4th day of MAY, 2016.

Tyquan Stewart  
Your Signature